

EXHIBIT A

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Volume 1, Pages 1-182

Exhibits: 1-3

UNITED STATES DISTRICT COURT

FOR THE DISTRICT OF MASSACHUSETTS

MAURA O'NEILL, as administrator of the Estate of
Madelyn E. Linsenmeir,

Plaintiff,

vs. CA No. 3:20-cv-30036

CITY OF SPRINGFIELD, MOISES ZANAZANIAN,
REMINGTON McNABB, SHEILA RODRIGUEZ, HAMPDEN
COUNTY SHERIFF'S DEPARTMENT, and JOHN/JANE DOES
NOS. 1-5,

Defendants.

REMOTE DEPOSITION OF SUSAN W. McCAMPBELL

Wednesday, March 27, 2024, 10:00 a.m.

Via Zoom Videoconference

-----Reporter: Kathleen L. Good, CSR, RPR-----
K. L. GOOD & ASSOCIATES
Post Office Box 367
Swampscott, Massachusetts 01907
Tel. 781-367-0815
Kathleen.Good@verizon.net

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1 higher.

2 You know, my experience is that
3 detainees and inmates generally are very poor
4 consumers of healthcare. One of the reasons why
5 they get in trouble with the justice system is
6 often times medical/mental health care. They're
7 not informed consumers.

8 Frequently, they don't even know how to
9 access care. They don't understand the
10 difference between a nurse practitioner or a PA
11 or a doctor. So if they don't see a doctor, they
12 demand to see a doctor.

13 There's a whole dynamic that goes on in
14 a booking area that makes generalizations really
15 difficult.

16 Q. Ms. McCampbell, staying on the same
17 topic of circumstances, if somebody was
18 experiencing chest pain, hypothetically,
19 somebody is experiencing chest pain and they
20 made a complaint of chest pain, and they're
21 denied medical care in response to their
22 complaint of chest pain, would that qualify as
23 impeded or unimpeded access to medical care?

24 MR. VIGLIOTTI: Objection.

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1 begins with "she told them "and then going, I
2 guess, another couple of sentences and ending
3 with "she asked multiple times to be taken to
4 medical."

5 Do you see that section I'm talking
6 about?

7 A. Yes, I do.

8 Q. So looking at that phrase, so I'm
9 going to read it into the record. It says:

10 "She told them that she had pain in
11 her chest. I remember her saying, again, my
12 heart hurts and my chest feels tight, among
13 other things. She asked multiple times to be
14 taken to medical."

15 So hearing that excerpt, my question
16 is:

17 If Madelyn had complained about
18 chest pain to correctional officers and asked
19 to see medical and they had refused to obtain
20 medical attention for her, would that be
21 consistent with the accepted standard?

22 A. Well, really is based on the
23 credibility of the statement, Mr. Halstead,
24 because this statement was made 1,700 days after

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1 A. You know, these hypotheticals are very
2 difficult to answer because there's a whole
3 environment that goes around them in terms of if
4 somebody is staggering into an emergency room of
5 a hospital and clutching their chest and gasping
6 for air, that's one version of chest pain.

7 Another person comes in and they
8 sprained the muscle that goes across their chest,
9 that's another -- I mean, hypotheticals are truly
10 difficult for me to answer in any way that's
11 informative to you, Mr. Halstead.

12 Q. (By Mr. Halstead) I want to show you
13 a document that you listed as having been
14 reviewed and I'll share my screen so you can
15 see it.

16 (Screen shared.)

17 Do you recognize this document?

18 A. Yes, I do.

19 Q. Do you know who Haylee Champagne is?

20 A. I believe she was incarcerated with
21 Ms. Linsenmeir.

22 Q. I want to draw your attention to
23 Paragraph 4, specifically at the end of the
24 third line, the sentence specifically where it

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1 the event occurred.

2 So I sort of reject the premise that
3 has any factual basis to be able to conclude
4 anything for me.

5 Q. When you say it's based on
6 credibility, what do you mean by that?

7 A. I mean that this is a detainee who is
8 in a jail setting, and 1,717 days later, she
9 signs a declaration with specific recollections
10 of detail, and I find that hard to believe,
11 frankly.

12 Q. So when you say you find that hard
13 to believe, is it your opinion that it's not
14 credible?

15 A. I believe that's what I wrote in my
16 report.

17 Q. So just to make the record clear, is
18 your answer to my question Yes?

19 A. My conclusion was that it was not
20 plausible or realistic or credible.

21 Q. So assuming that this statement --
22 this would involve making an assumption but
23 just bear with me.

24 Assuming that the statement is

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1 truthful, would a refusal to provide care in
2 that situation be consistent with the accepted
3 standard?

4 A. It's too much of a leap for me,
5 Mr. Halstead.

6 Q. Is your answer No?

7 MS. OLANOFF: Objection.

8 A. My review of this matter shows that
9 Ms. Linsenmeir had multiple opportunities to
10 provide her concerns to medical staff in the
11 unit, in the housing unit, staff in the unit.

12 If she had provided her concerns to
13 housing unit staff and medical staff and been
14 refused, which would be a violation of policy at
15 WCC, then I would say it doesn't meet an accepted
16 level of care.

17 But there's too many ifs in this
18 sentence regarding Ms. Champagne's statement to
19 be able to use that as the basis for any
20 conclusion 1,700 days after the event.

21 MR. HALSTEAD: So I have another
22 document that I want to show you.

23 Mark the declaration of Haylee
24 Champagne as Exhibit 2.

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1 (Marked, Exhibit No. 2, Declaration
2 of Haylee Champagne.)

3 (Screen share stopped.)

4 (Discussion off the record.)

5 MR. HALSTEAD: Next, I would like to
6 mark as Exhibit 3, this document, Declaration of
7 Alexandria Cox.

8 (Marked, Exhibit No. 3, Declaration
9 of Alexandria Cox.)

10 (Screen shared.)

11 Q. Do you see the document on the
12 screen, Ms. McCampbell?

13 A. Yes.

14 Q. Do you recognize this document?

15 A. Yes.

16 Q. Do you know who Alexandria Cox is?

17 A. She was incarcerated with
18 Ms. Linsenmeir.

19 Q. So next I would like to direct your
20 attention to Paragraph 5. I would like to read
21 this excerpt into the record.

22 "I and other prisoners tried to
23 speak up for Madelyn and asked the WCC staff
24 members to get her medical attention because it

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1 seemed like she became too weak and sick to
2 speak up for herself."

3 Do you see that?

4 A. Yes.

5 Q. So based on that excerpt,
6 Ms. McCampbell, my question to you is:

7 If correctional officers received
8 requests for medical attention from other
9 prisoners on Madelyn's behalf and they refused,
10 would that be consistent with the accepted
11 standard?

12 A. Well, the same comment I had regarding
13 Ms. Champagne's declaration is what I have
14 regarding Ms. Cox's declaration, which is that
15 1,700 days later, I find it incredible,
16 uncredible to believe that she has this kind of
17 recollection. And she uses phrases like "very
18 lethargic," which doesn't sound like language I
19 very often heard in a jail setting.

20 Also, let me point out too, I should
21 have mentioned this, when you look at the video,
22 you can see that Ms. Champagne came in and out of
23 her cell multiple times during the course that
24 Ms. Linsenmeir was her cellmate, and never did

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1 Ms. Champagne come out and speak to the
2 corrections officers. She would come out; she
3 would get her meal; she would sit down. There
4 was no urgency, there was no interaction that I
5 was able to see in those hours of video.

6 So that's the other thing that resulted
7 in my conclusion about Ms. Champagne's
8 declaration.

9 Ms. Cox's declaration, I think, to me,
10 suffers the same thing. This is a lot of detail
11 to remember 1,700 days after an event.

12 So to answer your question, you know,
13 hypothetical, the staff working in a jail, if
14 they were alerted by an inmate, to a sick inmate,
15 and they failed to take action, that would be a
16 concern.

17 But I'm not thinking that, in my
18 opinion, that Ms. Champagne's and Ms. Cox's
19 declarations provide the basis for making that
20 conclusion about Ms. Linsenmeir.

21 Q. Is the basis for your conclusion
22 that in that instance, that this situation
23 didn't or wasn't sufficient for a correctional
24 officer to provide medical care, is that basis

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1 rooted in your conclusion that this statement
2 of Alexandria Cox isn't credible?

3 A. The basis for my conclusion about the
4 credibility of both of these statements are the
5 time that has passed between the event and them
6 writing these. The language that's used does not
7 sound like thousands of inmates' grievances and
8 letters that I've read over the years.

9 Also, looking at the evidence, the
10 video evidence, that shows that at least
11 Ms. Champagne had access to staff and showed no
12 urgency or need to speak to them in the hours I
13 looked at and I don't know where Ms. Cox was
14 housed but, you know, I didn't see any urgency, I
15 didn't see detainees rushing up to staff, you
16 know, saying, you must come right now, there's a
17 sick person. I didn't see any of that.

18 So when you add that with the 1,700
19 days that passes between the event and these two
20 declarations, it just raises my concern about the
21 credibility of them.

22 Q. So going back to the report -- you
23 have the report in front of you, correct,
24 Ms. McCampbell?

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1 the WCC did well with this in terms of its
2 interaction.

3 Q. How did you go about forming that
4 specific opinion?

5 A. Based on years of supervising booking.
6 I mean, if you look at the policy, you look at
7 what has to happen, and WCC does, in my view, a
8 good job of bringing people in and individually
9 screening them.

10 Thankfully for them, they don't have a
11 lot of volume in the women that are coming in, so
12 they have an opportunity to engage them more,
13 talk with them.

14 Q. Did anybody assist you in
15 formulating this specific opinion?

16 A. No.

17 Q. Is there a specific authority used
18 to establish accepted practices as it relates
19 to booking?

20 A. That's what my other response is.
21 There's a variety of documents talking about what
22 booking procedures should be. A lot of them
23 relate to identification of the incoming
24 arrestee. A lot of them relate to health and

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1 A. What page are you on there?
2 (Screen share stopped.)

3 Q. Going back to Page 12, specifically
4 Paragraph 3, the booking section.

5 A. Okay.

6 Q. So for this procedure, what is the
7 basis for your opinion that it's consistent
8 with accepted practices?

9 A. Which sentence are you looking at?

10 Q. So I guess this is the fifth line
11 down, at the end of that sentence, beginning
12 with, it says:

13 "This is accepted practice in
14 jails."

15 A. Okay. I see it. Okay.
16 What's the question?

17 Q. What is the basis for your opinion
18 that this policy is consistent with accepted
19 practice?

20 A. Because I don't know any other way that
21 a booking operation would go. This is how you do
22 it. You bring the detainee in, put them in front
23 of an officer. You do questions. You talk with
24 them. Some people don't even do that, so I think

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1 mental health screening and screening for other
2 conditions that might be violence and other
3 conditions.

4 I mean, I don't think you want my
5 lecture on jail operations 101 again. There's
6 just plenty of documentation out there. There's
7 not a single place that you go to learn this.

8 Q. So I know there is no one specific
9 authority, but what are some of the accepted
10 authorities on the accepted standard when it
11 comes to booking?

12 A. The general standards, you can look at
13 the Commission on Accreditation for Corrections,
14 you can look at those standards; you can look at
15 the PREA standards in terms of sexual safety.
16 Those are just two of them.

17 There's 37 states that have state
18 standards, so there's 37 more you can look at
19 too. So there's a variety.

20 Clearly, the medical staff would have
21 an interest in doing screening for medical. The
22 security staff for the violence-related issues.
23 There's not one place that you go to.

24 Q. Did you consult the Commission on